

REG. PATENT AGENTS
FREDERICK R. HANDY
MARYANNE ARMSTRONG, PH.D.
MAKI HATSUMI
MIKE S. RYU
CRAIG A. MCROBBIE
GARTH M. DAHLEN, PH.D.
LAURA C. LUTZ
ROBERT E. GOOZNER, PH.D.
HYUNG N. SOHN
MATTHEW J. LATTIG
ALAN PEDERSEN-GILES
JUSTIN D. KARJALA
C. KEITH MONTGOMERY
TIMOTHY R. WYCKOFF
HERMES M. SOYEZ, PH.D.
KRISTL L. RUPERT, PH.D.

*ADMITTED TO A BAR OTHER THAN VA.

MAIL ADDRESS: P.O. BOX 747, FALLS CHURCH, VIRGINIA, USA 22040-0747

Other _____

The filing fee has been calculated as shown below:

LARGE ENTITY				SMALL ENTITY	
FOR	NO. FILED	NO. EXTRA	RATE FEE		RATE FEE
BASIC FEE	***** ***** *****	***** ***** *****	***** ***** \$690.00 *****	or	**** **** \$345.00 ****
TOTAL CLAIMS	13 - 20 =	0	x18 =\$ 0.00	or	x 9 = \$ 0.00
INDEPENDENT	4 - 3 =	1	x78 =\$ 78.00	or	x 39 = \$ 0.00
MULTIPLE DEPENDENT CLAIM PRESENTED <u>no</u>			+260 = \$ 0.00	or	+130 = \$ 0.00
TOTAL \$ 768.00				TOTAL \$ 0.00	

X A check in the amount of \$ 808.00 to cover the filing fee and recording fee (if applicable) is enclosed.

____ Please charge Deposit Account No. 02-2448 in the amount of \$ _____. A triplicate copy of this transmittal form is enclosed.

____ No fee is enclosed.

If necessary, the Commissioner is hereby authorized in this, concurrent, and future replies, to charge payment or credit any overpayment to Deposit Account No. 02-2448 for any additional fees required under 37 C.F.R. 1.16 or under 37 C.F.R. 1.17; particularly, extension of time fees.

Respectfully submitted,

BIRCH, STEWART, KOLASCH & BIRCH, LLP

By _____

JOHN CASTELLANO

Reg. No. 35,094

P. O. Box 747

Falls Church, Virginia 22040-0747

(703) 205-8000
JAC/cqc

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